

**Children's Population Health
Asthma Prevention in the Built Community
Project Workplan**

I. Project Title and Project Purpose Statement

The title of the project is Asthma Prevention in the Built Community. The purpose of the project is to reduce the high incidence of asthma in a low-income minority area of Dallas County through asthma education and prevention in the built housing community.

Asthma affects approximately 20 million people in the United States and is now the most common chronic childhood disorder, affecting 9 million children.¹ Environmental factors play a large role in the high incidence of asthma for children today, yet a key component missing in most of the discussion about asthma is asthma prevention in the housing building process as a way to assist in creating healthy asthma-free homes and communities.

Children's Population Health, with partner Builders of Hope and a network of other partners, seeks to reduce asthma in West Dallas by building asthma-friendly housing and educating builders and the community about asthma triggers in homes.

The project location will be in Dallas, Texas in the West Dallas community, specifically zip code 75212.

Clean Air Act Section 103(b)(3) and Toxic Substances Control Act Section 10(a) both relate to this project because of the focus on investigating and reducing asthma triggers in the home building process as well as educating the community about existing home asthma triggers. Common asthma triggers include indoor air quality and toxic substances in building materials. The project would provide educational materials on the determined asthma triggers through trainings for builders and residents, a wide outreach effort in the community, and development of an asthma certification for builders to use to build healthy homes in and beyond the project area.

Each project partner will play a role in contributing to the comprehensive asthma prevention plan in the built community. Project partners include the following organizations and individuals:

1. Builders of Hope
2. Serve West Dallas
3. The School Zone
4. Children's Medical Center of Dallas
5. MyChildren's
6. City of Dallas Mayor Pro Tem Monica Alonzo

¹ Children's Medical Center. "Beyond ABC: Accessing Children's Health in Dallas County," 2013, 41.

7. Greater Dallas Planning Council

II. Environmental and/or Public Health Information about the Affected Community

Asthma is a chronic lung disease that inflames and narrows the airways, and is particularly serious for children because of their smaller airways. Asthma is the most common chronic condition among children under 18 and in Dallas County alone there are over 60,000 children with asthma.² Further, the Dallas-Fort Worth Metroplex is the 8th most ozone-polluted metropolitan statistical area in the nation.³ Asthma symptoms include coughing, wheezing and chest tightness, and ozone pollution or other triggers such as mold, pollen and dust mites exacerbate many symptoms.

Asthma, when unmanaged or undermanaged, can result in preventable emergency room visits, hospitalizations, and even deaths. Asthma is among the top admitting diagnoses at Children's Medical Center of Dallas. In 2011, Children's Medical Center of Dallas admitted 2,596 children for a primary or secondary diagnosis of asthma.⁴ Children with asthma have a higher morbidity rate, a higher rate of healthcare utilization, and incur greater health care costs than children without asthma.⁵ Asthma disproportionately affects children, minorities, persons of lower socioeconomic status and those living in urban communities.

The project location of West Dallas is an area that is disproportionately impacted by public health harms and risks. This is a low-income minority community in an urban area where the existing housing is generally not asthma friendly. In fact, West Dallas project zip code 75212 has the highest possible hospitalization rate for asthma.⁶ This information indicates that in the project area, children have the greatest risk of being hospitalized for asthma.

West Dallas is important because it represents nearly 25% of Dallas' total population, yet lags far behind the City of Dallas in many key socio-demographic indicators. For example, according to data from the Texas Education Agency and the 2010 U.S. Census, West Dallas is a primarily Hispanic (72%) and African American (25%) community with only a 2.2% college graduate rate compared to 27% in Dallas. Further, 67.1% of people beyond age 25 in West Dallas have not completed High School, compared to 30.6% in

² Texas Health Care Information Collection (THCIC). Inpatient Hospital Discharge Public Use Data File, 2010, 4.

³ American Lung Association. "State of the Air 2013," 2013. Retrieved from State of the Air: <http://www.stateoftheair.org/2013/city-rankings/most-polluted-cities.html>.

⁴ Children's Medical Center of Dallas. "Beyond ABC: Accessing Children's Health in Dallas County," 2013, 42.

⁵ Rodriguez, M., Winkleby, M., Ahn, D., Sundquist, J., Kraemer, H. Identification of Population Subgroups of Children and Adolescents with High Asthma Prevalence Findings from the Third National Health and Nutrition Examination Survey. *Archive of Pediatric Adolescent Medicine*. 2002, 156: 269-275.

⁶ DFW Hospital Council Data Initiative

Dallas. Finally, per capita income is just \$9,813 in West Dallas compared to \$24,273 in Dallas.

West Dallas in the first half of the 20th century was once called “The Devil’s Front Door” because it was an industrial area known for crime, poverty and racial segregation. In fact, when lead smelters were introduced as the area’s predominant industry, air and soil became highly toxic and led to illness and death in the community. In 1954, West Dallas was annexed into Dallas and 3,500 units of low-income housing known as the “Monument to Poverty” was built, one of the largest low-income housing projects in the nation. However, in the last several decades, the West Dallas community has come together to work to revitalize the area. However, the health issue of asthma prevention in building housing has not yet been discussed as a consideration to improve health in this community.

III. Organization’s Historical Connection to the Affected Community

Children’s Population Health was created in 2012 from Children’s Medical Center’s knowledge gained from 100 years of experience that where families live usually determines how they live and how much they are able to focus on their children’s health and well-being. Thus, Children’s Population Health is a transformational pediatric value-based health model for pediatric wellness. Rather than the current fee for service health model that is reactive when children need medical services, Children’s Population Health is pro-active, thinking of the total health of populations of children in their communities and willingly taking on the risk for improving health outcomes for children in North Texas.

Children’s Population Health is only successful through the strength of its partnerships with other clinical organizations, physician groups and neighborhood coalitions, who all understand that it does take a village to raise a child. The goal of Children’s Population Health is to improve the health and well-being of all children and their communities. Although Children’s Population Health is a fairly new organization, it has strong ties to Children’s Medical Center of Dallas and organizations that have been involved in the West Dallas community for years.

The Children’s Medical Center of Dallas Ambulatory division initiated involvement in the West Dallas community in 2009 because West Dallas (zip codes 75212 and 75211) had the highest low acuity visits to Children’s Medical Center’s emergency department. Children’s Medical Center wanted to understand why residents were not seeing primary care physicians for minor health issues such as fever and ear pain. To help understand this issue, in 2009 a representative from Children’s Medical Center served on the West Dallas Community Coalition, which is comprised of West Dallas organizations and residents focused primarily on health and education issues. Children’s Medical Center presented to the coalition the idea of a community-based needs assessment in West Dallas to understand the healthcare needs of children in the West Dallas community.

The Coalition supported this proposal and served as the Advisory Committee for the project research. Children's Medical Center used a focus group methodology on the rationale for going to the Emergency Room and to learn the community's view of sick care and well care. The guided focus groups were comprised of parents and caregivers of children living in the West Dallas area. Research was concluded in 2011, and as a result, Children's Medical Center implemented several educational resources for families (such as a fever toolkit), which are utilized in MyChildren's (a project stakeholder and network of primary care clinics in low-income neighborhoods) and other clinics throughout the West Dallas community. The involvement with the West Dallas Coalition has been an opportunity to hear what the community wants and needs in regards to health services, and also provides a forum to share information regard health services and updates in the community.

Further, for three consecutive years since 2011, Children's Medical Center of Dallas Asthma Management program has partnered with the U.S. Environmental Protection Agency (EPA) Region 6 and several other stakeholders to hold a Children's Health Fall Festival in West Dallas to raise awareness of children's health issues, including asthma education. Children's Medical Center's Asthma Management program moved to Children's Population Health when Children's Population Health was formed in 2012. Therefore, Children's Population health has been involved in these efforts through the Health Festival's planning committee, which included West Dallas residents.

Also, in 2013, Children's Population Health played a large role in the creation of a pediatric primary care clinic in West Dallas for MyChildren's. Children's Population Health developed and analyzed data to help determine where to put the clinic. This effort increased access to quality health in a community where few options exist for families who depend on Medicaid and Texas' Children's Health Insurance Program.

Finally, since 2012, Children's Population Health has overseen a school nurse asthma outreach initiative, which was started in 2008 by Children's Medical Center of Dallas. This initiative supports the local public school nursing community through providing education and professional development trainings to assist their efforts in taking care of chronic cases of asthma in the school setting. The initiative holds monthly meetings as well as ongoing projects and initiatives to help support school efforts to provide asthma care for children.

IV. Project Description

i. A concise description of the activities the project will undertake during the two year project period to examine and address the environmental and/or public health issue(s), e.g. training, education/outreach programs, capacity-building efforts, research, etc.

The project area of West Dallas zip code 75212 is an area where children have the greatest risk of being hospitalized for asthma. The project seeks to reduce the high incidence of asthma in the project area through asthma education and prevention in the built housing community. The project will achieve these results through the following project activities:

- Identify asthma triggers in building materials and in homes;
- Develop and implement a comprehensive asthma health policy for building housing and asthma prevention strategic plan for building housing for a consortium of community development corporations to adopt in project area;
- Provide trainings on how to perform asthma home assessments open to builders and residents alike;
- Disseminate educational information about asthma home triggers and asthma home prevention in the communities; and
- Develop and gain approval of criteria for builders to receive asthma certification.

In the first stage of the project, activities will focus primarily on research and identification of asthma triggers and recommendations to reduce these asthma triggers, as well as beginning to educate stakeholders and residents on the issue. Children's Population Health project staff will host Task Force meetings of health professionals and other technical experts to research and identify asthma triggers in homes and in building materials. The Task Force will also provide recommendations for the prevention of asthma triggers in homes and building materials. Project staff will then compile the home asthma triggers information into educational pamphlets/materials for dissemination in the community through various partners. By providing asthma triggers information to the community, the project will begin educating residents about the issue and increase their capacity to address the issue in their homes through easy solutions to help prevent indoor home asthma triggers.

After the identification of the asthma triggers information by the Task Force, Children's Population Health project staff will work with partners to educate a consortium of community development corporations about the Task Force findings and recommendations regarding asthma triggers in homes and building materials. Children's Population Health will also host a workshop for the community development corporations featuring a speaker (such as from Enterprise) to discuss healthy "green" initiatives and best practices in building green communities. These activities will increase awareness about asthma triggers in building materials and increase the number of stakeholders informed about the project's efforts and larger goals in building a healthy, sustainable community.

The second stage of the project will focus on the development of a comprehensive asthma health policy and asthma prevention strategic plan for building housing. Children's Population Health project staff will host a Task Force of relevant stakeholders to discuss and draft the policy and strategic plan.

Project staff and relevant partners will meet during this stage to discuss the best strategies for implementing trainings on how to perform home asthma health assessments, and the trainings will begin. The trainings will be available to the consortium of community development corporations and residents in the project area. Trainings are necessary for community development corporations that revitalize existing housing, as they will learn about what to look for to implement asthma-friendly home changes. Further, it will provide community residents with the knowledge of how to perform their own home assessments, therefore raising awareness about home asthma prevention in the community.

Project staff and relevant partners will meet as needed to discuss community education of asthma home and building triggers and prevention, targeting potential homebuyers. Project staff and partners will engage the community not only through dissemination of educational materials, but also through homebuyers seminars hosted by the consortium of community development corporations and an educational video for use by the community development corporations.

The third stage of the project will focus on gaining consensus from the community development corporations on the asthma health policy and asthma prevention strategic plan for building housing, and adopting and implementing the policy and strategic plan in their work building and revitalizing homes.

This stage will also focus on the development of criteria for an asthma building certification. Project staff and relevant partners will meet to discuss and develop appropriate criteria for the certification. The goal of developing an asthma certification is so that this project's work can be replicated beyond the project area so that all communities can be built in a healthy, asthma-free, sustainable way.

In the last stage of the project, the criteria for an asthma building certification will be adopted by project staff and relevant partners and submitted for approval to the U.S. Green Building Council or a similar certifying organization.

ii. A concise description of how the organization and its partners will work together during the year to address the local issue(s).

Children's Population Health is collaborating with several organizations to address the issue of reducing the high incidence of asthma in the project area through asthma education and prevention in the built housing community.

Builders of Hope builds and revitalizes homes in the project area of West Dallas. Builders of Hope has been in operation since 1998 and has built over 240 energy efficient homes, most of which have been built in West Dallas. Since 2009, Builders of Hope has helped provide 115 affordable homes for families, including 87 in West Dallas. The average income of a new buyer served by Builders of Hope in 2013 was \$32,745 (50% of the area

median income). All buyers received down payment assistance averaging \$20,000. Builders of Hope's goal for 2014 is to build and sell a minimum of 35 homes. By the end of 2015 they plan to build and sell 50 homes each year going forward.

Builders of Hope is not only building quality affordable housing (the average home sales price in 2013 was \$94,678), but also helping to transform urban areas by building strong families and safe, healthy communities. For example, in 2013, Builders of Hope added \$1,893,579 (through 20 homes) in new home value on non-productive or foreclosed property in their areas of operation. Also, Builders of Hope hosts community meetings to discuss any issues and provides numerous educational opportunities for homebuyers.

Builders of Hope will play a role in project activities. A designee of Builders of Hope will serve on the Task Force to help shape the asthma health policy and strategic plan for building housing. They will also connect the project to the consortium of community development corporations they belong to and help educate them on asthma triggers and gain their support of the asthma health policy for building housing and asthma prevention strategic plan for building housing. Builders of Hope will also work with project staff to implement the adopted policy and strategic plan into building new homes. Finally, Builders of Hope will assist in helping draft the criteria for an asthma building certification. Builders of Hope has extensive relationships with individuals and organizations in West Dallas and will be invaluable to assist the project in gaining community buy-in for the project activities. Children's Population Health will maintain and sustain this partnership through regular status meetings with Builders of Hope.

Two departments of Children's Medical Center of Dallas will assist in providing expertise in critical areas for the project. Children's Medical Center of Dallas division of Governmental Relations and Community Relations staff will provide policy expertise to the project Task Force developing the asthma health policy and strategic plan for building housing. In addition, this division develops the annual report examining the quality of life for children in Dallas. The project will utilize that asthma data to provide asthma baselines for the project. Further, Children's Medical Center Clinically Integrated Network of Physicians will be a partner involved in connecting the project to community residents and patients who may be candidates for asthma home health assessments based on their health histories. Physicians in this group have patients living in housing in the project area so could assist in disseminating project asthma home triggers educational materials to patients as appropriate. A physician representative from this group will also assist the project Task Force in helping to identify asthma triggers in building materials and in homes, as well as serve on the Task Force developing the asthma health policy and strategic plan for building housing.

Further, Children's Population Health Clinical Integration group, which provides asthma home health assessment trainings, will have a representative serve on the project Task Force to identify asthma triggers in building materials and in homes. This group will also work closely with project partner Children's Medical Center of Dallas- Clinically

Integrated Network of Physicians division in order to ensure the project asthma home health assessment trainings are successful. Key staff from this group will provide the trainings to the community development corporations and residents in the project area to provide builders the tools to perform assessments on their own and so that residents are educated about what to look for in their own home and in their community.

MyChildren's, a network of pediatric primary care clinics in low-income neighborhoods, will be a project partner. Dr. Ray Tsai, MyChildren's President and Chief Medical Officer, will provide his expertise on the project Task Force to identify asthma triggers in building materials and in homes, as well as the Task Force developing the asthma health policy and asthma prevention strategic plan for building housing. Dr. Tsai can also help connect the project to other primary care physicians in the community. Finally, the MyChildren's primary care clinic in West Dallas is an ideal location to disseminate educational materials about asthma triggers in homes and how to prevent such asthma triggers. The clinic has two physicians and a maximum capacity of 10,000 patients. The clinic currently sees approximately 4,500 patients, so has the ability to provide services to many more residents in the community. The clinic also serves the community as a North Texas Food Bank site, so has the ability to reach many community residents and raise asthma awareness.

Serve West Dallas will be a partner in promoting this project in the West Dallas community, as their vision is to see a spiritual, economic, social, and physical transformation of West Dallas neighborhoods in zip code 75212. As a nonprofit faith-based collaborative comprised of 12 faith-based nonprofits and liaisons with churches and businessmen, Serve West Dallas works collaboratively with the faith-based community on projects to improve the neighborhoods and empower residents. As a part of this project, Serve West Dallas' collaborators (nonprofits and churches) will disseminate educational materials about asthma home triggers and prevention to community members serviced by their programs. As appropriate, Serve West Dallas collaborators will also provide information about trainings of asthma home health assessments to community members serviced by their programs. For example, one of Serve West Dallas' partners, Voice of Hope Ministries, is a nonprofit organization that has worked in West Dallas for over 30 years and hosts an after-school program, a summer day camp, and a myriad of other family and community services activities. Voice of Hope has grown to serve over 300 children ages 4-18 daily in the after-school program and summer day camp. Therefore, Voice of Hope will be able to reach the many families of the children in their programs to educate them on this issue to help make the community healthier.

The School Zone is a project housed within Southern Methodist University's Center on Communities and Education (CCE) and is a partnership of more than 20 nonprofits, 12 public schools and 3 high performing private or charter schools in West Dallas to comprehensively address K-12 education in West Dallas. The program's goal is to ensure that children of all ages in West Dallas have access to high quality learning opportunities

and community resources, increasing the likelihood that they will graduate from high school ready for college and careers. The nonprofit leaders, school principals, Dallas ISD administrators and CCE staff meet regularly to discuss issues such as parent involvement, early childhood interventions and providing community resources that support students and strengthen families.

The School Zone is an ideal forum to educate West Dallas educational leaders about the project. The project will raise awareness in the educational community of the potential and benefits for West Dallas families to have a healthy home built or revitalized in an asthma-friendly way. A healthy home allows children to focus on succeeding in school and builds the foundation for a healthy and prosperous future career. In fact, nationally, asthma is the leading cause of school absences from a chronic illness.⁷ Even when symptoms are not severe enough to require urgent care, they can disrupt a child's ability to sleep and function at school. A child missing school due to asthma also means that parents are missing work. Due to these factors, it is imperative that the project work together with the educational community in West Dallas to help prevent asthma triggers in housing.

The Greater Dallas Planning Council will assist the project in providing their expertise on urban planning disciplines. For over 60 years, the Greater Dallas Planning Council has provided leadership to help shape, promote and advocate for a sustainable future for the Dallas region. The Council studies issues such as urban design and planning, transportation, the environment, economic development, and the inner city. The Council will support project staff through collaboration on building siting and design considerations that support and enhance the asthma prevention strategic plan for the built environment. Their assistance will be especially helpful as the project develops an asthma prevention strategic plan for building housing.

Finally, City of Dallas Mayor Pro Tem Monica Alonzo will be championing this project investment in the West Dallas community and beyond. Mayor Pro Tem Alonzo represents District 6, which includes West Dallas. Mayor Pro Tem Alonzo will help identify a representative to serve on the project Task Force to assist in the development of a comprehensive asthma health policy and asthma prevention strategic plan for building housing. Mayor Pro Tem Alonzo will also help identify ways to grow the project activities beyond the project area for the long-term benefit for the City of Dallas.

V. Organizational Capacity and Programmatic Capacity

Children's Population Health uses the Lawson system for Accounting. Lawson is a dynamic, consolidated work portal utilized by the entire Children's Health Services of Texas system.

⁷ Asthma and Allergy Foundation of America. Retrieved from aafa.org/display.cfm?id=8&sub=42#_ftnref

Because Children's Population Health was formed two years ago, the organization has not yet had the opportunity to manage federal funds. While the organization is fairly new, the organizational staff, project staff, and our partners all have years of previous experience managing federal funds and collaborative projects in the Dallas area, including the project area. Currently, Children's Population Health is successfully implementing a three-year High Risk Asthma Home Management grant program. This grant uses a multi-disciplinary approach to focus on high-risk patients with asthma to more effectively coordinate efforts to impact this specific patient population.

Children's Population Health plans to effectively manage and successfully complete this project through strictly adhering to the project timeline and working closely with Builders of Hope and other project partners to complete project activities. Children's Population Health project staff will have regular meetings with Builders of Hope and other partners to report on progress and identify any issues that need to be resolved. Further, Children's Population Health project staff has strong, established relationships in the affected community so collaboration and responsiveness will not be difficult with our project partners.

VI. Qualifications of the Project Manager

Project Manager Martha Rocha is uniquely qualified to manage this collaborative project. She has most recently served as Senior Director, Program Management, of the Health and Wellness Alliance for Children (Alliance), a community-wide effort to improve children's health and wellness outcomes in the Dallas area. In this role, she coordinates major children's health projects and coalitions in coordination with the Alliance's objectives. For the Alliance, Ms. Rocha specifically manages the Asthma Healthy Physical Environments Working Group and the Improved Access to Health Care Working Group.

Prior to her work at the Alliance, Ms. Rocha served as the Director of Community Relations for Children's Medical Center (CMC) of Dallas. In that role, she worked closely with community stakeholders to fulfill CMC's mission "to make life better for children." She also oversaw the production of CMC's annual report, Beyond ABC: Accessing Children's Health in Dallas County, which examines the quality of life for local children. Through her work at Children's Medical Center and at the Alliance, Ms. Rocha is well versed on the health impacts of asthma facing children in the project area.

Further, Ms. Rocha has strong relationships with key stakeholders in the Dallas community, including in this project area. She has served in leadership roles on several boards and committees in the community. For example, she has been a strong supporter of the Greater Dallas Hispanic Chamber of Commerce, serving not only as a board member but also as a Co-Chair of the Legislative Committee and Co-Chair of the Latina Leadership Awards event honoring Latina women. She also served as President of

the Hispanic 100, an organization comprised of Latina women. She currently serves as a board member of Mi Escuelita Preschool. Mi Escuelita provides early childhood education to low-income, at-risk children in the Dallas area, including at a location in West Dallas. She is also a former board member of the Greater Dallas Planning Council, an organization that will provide their expertise to this project.

Ms. Rocha has been recognized for her leadership in the community. In 2008, she received the *Dallas Business Journal* Minority Business Leader award and in 2009 she received the Hispanic Hero award by the Southern Methodist University Hispanic Youth Symposium.

VII. Past Performance in Reporting on Outputs and Outcomes

Because Children's Population Health is a fairly new organization, it has not yet had the opportunity to apply for or receive a grant that is of similar size, scope or relevance to this proposed project.

However, in October 2013, Children's Population Health received a three-year grant from the nonprofit organization The Crystal Charity Ball for \$770,000 to design and implement a High Risk Asthma Home Management program. The Crystal Charity Ball is a Dallas-based local non-profit established in 1952 for the sole purpose of aiding, supporting, and contributing to children's causes in Dallas County. As a nonprofit organization, independent of any national affiliation, members of The Crystal Charity Ball Committee have raised more than \$117 million for more than 140 worthy beneficiaries over the past 60 years.

The High Risk Asthma Management program was developed and designed by Children's Population Health Clinical Integration division. This program focuses on children considered to be at high risk for severe complications or death due to asthma. As part of the grant requirements, Children's Population Health provides quarterly reports, including financial reports, to the Crystal Charity Ball Grants Committee. These reports are mailed to The Crystal Charity Ball office located at 3838 Oak Lawn Avenue, Suite L150, Dallas, TX.

For the grant, Children's Population Health documents and reports on progress towards achieving the expected output and outcomes. We maintain data and report on the primary outcome of the percent change in hospital utilization pre- and post-intervention. Secondary outcome measures evaluation for improvements include reduction in emergency room visits, percentage of participants scoring in the controlled range on the Asthma Control Test, increase in Quality of Life scores, reduction in environmental triggers pre-post intervention, and increased utilization of evidence based clinical pathways by community providers.

The primary and secondary outcomes are measured and provided in a written progress report for the patients who completed the six month program. The evaluation methodology consists of utilizing electronic medical records to capture and track data pertinent to the outcomes measured. The program outcome measures will be evaluated at the end of the first year of the program.

Detailed Budget (see attachment)

Project Performance Measures/Milestones (see attachment)

VIII. Expenditure of Awarded Grant Funds

Because Children's Population Health is a fairly new organization, it has not yet been awarded federal grant money. The company is in the process of establishing a comprehensive Grants Management Process and has hired an outside consulting firm to help establish this process.

However, Children's Population Health has an expected approach to ensure awarded grant funds will be expended in a timely and efficient manner. Children's Population Health has established accounting systems in place to ensure funds are properly and timely recorded, in line with other non-profit entities of similar size and scope. Grant funds will be received by Children's Population Health and applied to the Resource Development accounting unit. Most importantly, the grant funds will be assigned an Activity Code. When grant funds are released according to the established budget, an expense will be recorded to the Resource Development accounting unit, under the corresponding Accounting Code and referencing the Activity Number. By assigning an Activity Number to the federal funds, we will be able to accurately account for the \$120,000 as it is appropriately expensed based on the guidelines set forth in the grant application. It is of the utmost importance to Children's Population Health that the \$120,000 is utilized in a timely and efficient manner.

Mr. Frank Ramirez is the designated Payee for the grant funds and, in conjunction with the Project Manager, will approve and monitor all cash outflows over the two year project period.

IX. Quality Assurance Project Plan (QAPP) Information

Children's Population Health believes we will need a QAPP for this project because we will be using existing environmental data to establish the baseline of the asthma health issue in the project location. The asthma data used will be from existing historical and current publicly available research reports, as well as from Children's Population Health databases.